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CONFIRMATION NO. 6875

Bib Data Sheet

SERIAL NUMBER 09/430,175	FILING DATE 10/29/1999 RULE	CLASS 435	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. CW-304
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APPLICANTS

STEPHEN A. LESKO, BALTIMORE, MD;
 PAUL O. P. TS'O, ELLICOTT CITY, MD;
 ZHENG-PIN WANG, ELLICOTT CITY, MD;

** CONTINUING DATA ***** 60/106, 118 10/29/98

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 11/29/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 3
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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 1100 New York Avenue N W
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 20005-3934

TITLE

MULTIPLE MARKER CHARACTERIZATION OF SINGLE CELLS

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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*Judy, Before mailing
 Can you please
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 their declaration.*

*Thank
 Karen*



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FILING FEE RECEIVED 1179	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	